

VOLUNTEER ADVOCACY SERVICES ANNUAL REPORT

July 2017 – June 2018



State Council on Developmental Disabilities

**State Developmental Center Volunteer Advocacy Services
Annual Report
July 1, 2017 – June 30, 2018**

I. Introduction

This report is respectfully submitted and presents information about volunteer advocate recruitment, training, demographics, and stipends as well as an overview of the advocacy services provided from July 1, 2017 to June 30, 2018.

The unique characteristic of each center and facility is reflected in the information, observations and recommendations submitted by each office.

State Council on Developmental Disabilities

Volunteer Advocacy Services Executive Summary Graph Annual Report

July 1, 2017 – June 30, 2018

	Canyon Springs	Fairview	Porterville	Sonoma	Total
Grievances	0	0	0	0	0
Total Residents as of 06/30/2018	49	108	313	78	548
Number of Residents Referred for Services	41	33	79	75	228
Number of Residents Provided Services	41	33	79	75	228
# of Residents Served by Volunteer Advocates	31	28	79	74	212
Average # of Contacts Per Month by Volunteers with Each Resident Served	6	2-3	3-4	3	3.75
Average # of Individual Related Meetings Attended Per Month	4	11	13	10	9.5
# of Residents Served by the Coordinator	10	5	5	1	21

	Canyon Springs	Fairview	Porterville	Sonoma	Total
Average # of Contacts Per Month by the Coordinator with Each Resident Served	8	2	2	1	3.25
Average # of Individual Related Meetings Attended per month	8	4	6	1	4.75
# of Self-Advocacy Groups Facilitated by the Coordinators and Volunteers	4	3	3	2	12
# of Volunteer Advocates	15	5	9	6	35
# of Volunteer Advocate Training Sessions	18	1	6	2	27
# of Volunteer Advocates Trained	15	5	5	6	31
# of Volunteers Paid Stipends	13	5	5	6	29

Nature, Status and Outcome of Complaints Filed Under the SCDD Grievance Procedure

Developmental Center	Nature of Complaint	Status of Complaint	Outcome of Complaint
Canyon Springs	None		
Fairview	None		
Porterville	None		
Sonoma	None		

II. Residents

Residents Referred and Provided Services

Developmental Center	Total Residents as of 6/30/2018	Number Referred for Services	Number of Residents Provided Services
<i>Canyon Springs</i>	49	41	41
<i>Fairview</i>	103	33	33
<i>Porterville</i>	313	79	79
<i>Sonoma</i>	78	75	75

Residents Referred for Services

Developmental Center	Males	Females	Mental Retardation	Cerebral Palsy	Autism	Epilepsy	Other	Forensic
<i>Canyon Springs</i>	35	6	31	2	4	4	0	0
<i>Fairview</i>	18	15	33					
<i>Porterville</i>	69	10	49	1				29
<i>Sonoma</i>	44	31	75					

*In order to report an unduplicated count, if a resident is in the forensic program, identify him/her under gender and forensic only.

Residents Provided Services

Developmental Center	Males	Females	Mental Retardation	Cerebral Palsy	Autism	Epilepsy	Other	Forensic
<i>Canyon Springs</i>	35	6	31	2	4	4	0	0
<i>Fairview</i>	18	15	33					
<i>Porterville</i>	69	10	49	1				29
<i>Sonoma</i>	44	31	75					

* If a resident is in the forensic program, he/she are identified under gender and forensic only.

III. Services

Developmental Center	# of Residents Served by Volunteer Advocates*	Average # of Contacts Per Month by Volunteers with Each Resident Served	Average # of Individual Related Meetings attended per month
<i>Canyon Springs</i>	31	6	4
<i>Fairview</i>	28	2-3	11
<i>Porterville</i>	79	3-4	13
<i>Sonoma</i>	74	3	10

*** In some instances, a resident might be served by both a volunteer and staff, depending upon their needs.**

ADVOCACY ASSISTANCE PROVIDED BY VOLUNTEERS

Canyon Springs

Volunteer advocates and Coordinator attend individual meetings, special team meetings, and transition meetings with clients. Volunteers attend pre-transition meetings, transition meetings and 30-day meetings once clients are placed in the community. Advocates meet with their consumers on a weekly and bi-weekly basis.

Advocates review the Plus Program with their clients to ensure they have a good understanding of the new program and their point system.

Volunteer advocates participate in “Walk to Work” activities with the clients on Monday, Wednesday, and Friday mornings. This support provides the client with opportunities for exercising (walking) around the facility and added time for positive communication and support.

Volunteer advocates have assisted clients in IPP meeting preparation by providing encouragement, support and planning. They have also practiced with clients on what they will say at their meetings and suggestions on what to expect.

Volunteer advocates meet with several clients in assisting with their selection and transition to group homes. Advocates assist clients in transitioning to their new homes by helping them come up with budgets, telephone numbers and addresses to advocacy agencies in the area. Advocates continue contact via phone and/or e-mail usually on a weekly basis.

Fairview

During the first half of fiscal year 2017-18, six VAS consumers returned to their home communities. Four consumers moved into negotiated rate/specialized homes and attend day programs in the community. One consumer moved into a residential care facility for the elderly (RCFE) and attends a day program. One consumer moved into an adult residential facility for persons with special health care needs (ARFPSHN) with programming provided in-house. In the ARFPSHN, many of the medical services are also provided at the home. These consumers have transitioned successfully to both their living and training programs in the community and continue to be followed by both the VAS Coordinator and their Volunteer Advocates. In addition to the consumers who moved from FDC, our project began providing community monitoring to three consumers who moved from Porterville Developmental Center into our catchment area. They moved into specialized homes. Three cases were closed at the conclusion of this reporting period as the consumers had been living in the community for one year at this time.

During the second half of fiscal year 2017-18, an additional six VAS consumers were able to move into the community. Of the six, one consumer was placed in negotiated rate home although the consumer was then transferred to Canyon Springs. Four were placed in a Level 4I home and one was placed in a RCFE. Five successfully transitioned to begin day program services five days per week and the consumer in ARFPSHN home is receiving in home day program services. Sixteen cases have been closed at the conclusion of this reporting period as the consumers had been living in the community for one year.

Currently there are twenty-three FDC VAS consumers in some stage of transition to the community. However, there are five consumers who still do not have any identified provider at this time.

Volunteer advocates continue to visit with consumers several times per month at Fairview DC. They attend any meetings scheduled for the consumer. The various types of meetings they attend include annual individual program plan meetings (IPPs), special conferences and several types of placement planning meetings, from the "Meet and Greet" with potential community vendors, the Transition Planning meeting, Transition Meeting updates and the Transition Review meeting. Advocates have continued to visit and follow up with consumers once they move into the community at various intervals as required. These visits include face to face visits at the following intervals: at the fifth day living at the home, the 30 day IPP meeting, the 60 day IPP meeting in some cases, the 90 day meeting, the six month meeting, and the one year IPP meeting with their consumer. The advocates follow the consumer for one year after leaving Fairview and also stay in contact with them or the facility staff by phone during the months when no meetings are held. These community meetings are usually held at the home or at the day services.

- When visiting a community client who spends a lot of time in a wheelchair, the volunteer advocate requested the consumer getting out of his wheelchair at home and day program for short periods of time. The advocate also had concerns about his posture and asked for recommendations for improving it. As a result of her efforts they came up with him having a beanbag chair at both places which has proved to be an upper torso building activity. In addition, having both occupational and physical therapy has been helping him to make progress.
- One of the Volunteer Advocate's consumers had to wait over a year in anticipation for his home to be built. The advocate continued to discuss and help him understand the placement process. As a result, the client's anxiety decreased about his transition to his new home.
- A Volunteer Advocate provided a link between people that knew a consumer for most of her Fairview years and new community staff with ideas that worked well to build rapport with this difficult client. She continues to do well in the community.
- A Volunteer Advocate requested that a day program be acquired before the consumer moved into the community. The new home brought a day program provider to meet the consumer. The Volunteer Advocate informed the residential provider the day program would not meet consumer's needs as it was not a work-based program. Another program, which is an actual work program, will be found before consumer moves to the community.
- While visiting the consumer in his room, the Volunteer Advocate requested the shade by the consumer's bed be pulled down during the day because of continued redness on the left side of his face.
- Volunteer Advocates participated in Person Centered Planning meetings for their consumers that a particular regional center has been conducting. This was in addition to participating in TPMs/TRMs.
- A Volunteer Advocate was concerned about one of her consumers as the consumer was showing signs of dementia. She requested an evaluation be conducted.
- Two Volunteer Advocates had concerns regarding the condition of consumer wheelchairs prior to and during community placement. With regards to the first consumer, after identifying the issue, it was determined that FDC would provide

follow up for the consumer's two wheelchairs by trying to repair them. One of the wheelchairs was remedied while the second required extensive work. The regional center will purchase a new wheelchair once insurance has transferred over to the community insurance provider. With regards to the second consumer, the volunteer advocate informed the team at the TRM that the wheelchair still needed work to be done to ensure it was in working condition before the move to the community. The necessary repairs were done prior to the move.

- While conducting a community visit, the Volunteer Advocate was told the consumer was not signed up for Special Olympics, which was a preferred activity while at Fairview. The home reported they could not find the organization in their area. The volunteer advocate contacted the Acting VAS Coordinator who contacted the FDC Special Olympics contact. As a result of these efforts this home was provided with the necessary information to enroll the consumer in Special Olympics.
- A Volunteer Advocate continued to bring up with the residential provider the necessity of having a psychiatrist for consumers who moved into their particular residential home. When consumers were placed in the home, at the advocate's request, the facility had contracted with a psychiatrist. For these two consumers, having a psychiatrist was key to their success.
- During a TPM, it was suggested the consumer use her own money to pay for her airfare when she flies to move up north to move to her community placement. The Volunteer Advocate brought up her concern, as airfare should be the responsibility of the Regional Center as it is part of the placement process. It was confirmed at the TRM that Regional Center would pay for the airfare.
- A Volunteer Advocate continued to reiterate with the residential provider the necessity of having a psychiatrist for consumers who moved into their particular residential home. When consumers were placed in the home, the facility had one but by the end of the year they did not. For these two consumers, having a psychiatrist was key to their success. The home has since secured this necessary support.
- A Volunteer Advocate requested to have one of her consumers who is blind to ride in a vehicle as they were missing out on community and eating out events. The Volunteer Advocate asked the RT to increase desensitization training for transportation to more than the standard 1-2 times per week. Consumer was resistive and progress slow until the Regional Center provided a trainer two times a week. Consumer has been successfully transported to and from the proposed

community home and stayed for 45 minutes exploring the environment. Placement is close with transportation no longer a barrier.

- A Volunteer Advocate became acquainted with a parent of an individual who was not served by SCDD VAS. Parent was very negative about community placement in addition to the care his daughter was receiving at FDC. Volunteer advocate has since become the advocate. The Advocate requested training for the consumer to utilize her walker so the two of them could go for walks around campus as well as ambulating more safely for her staff. She tended to lean on the staff. The team got her a walker; volunteer advocate suggested she get a permanent walker with a seat attached, as she would be able to rest when she became winded. The Volunteer advocate has helped the parent become more comfortable and reassured. The consumer appears happier with the use of a walker and being able to go for walks with the advocate. The advocate has been able to assure the parent of this individual's comfort level with the proposed community provider. Community visits have commenced.
- A Volunteer Advocate had noticed one of their consumers' preferences for Spanish music. He seemed more attentive whenever he heard it. This was brought up at the consumer's IPP meeting; staff also indicated they had noticed this preference. As a result, the consumer's radio is now tuned to a Spanish station whenever he is in his room.
- A Volunteer Advocate reported one of the consumers she has been following for the past year has lived successfully into the community for the year. The consumer made a major decision to no longer take pain medications. The consumer would exhibit behaviors and request this medication. After the consumer's self determination to not take the medication, she became more medication compliant with the other medications being taken.
- A Volunteer Advocate discussed with consumer's interdisciplinary team that consumer's hair would not be cut extremely short, as advocate was able to ascertain they did not want it cut that way.

Porterville

Volunteer Advocates attended sixty-four IPPs and/or IPP reviews. Advocates participated in thirty-four community transition activities. These activities includes: visits to community care facilities, day/work programs, meet and greets, Transition Planning Meetings, Special meetings and Transition Review Meetings. The volunteer advocate or Coordinator made 420 visits/contacts, or IPP review meetings with VAS residents living in the community.

Advocates spend at least three hours a month per resident that are assigned to the advocate. These hours include but are not limited to meetings (IPPs etc.) for the resident, playing skill building games, assisting with communication building, promoting advocating with staff their wants and needs, increasing their money management skills, and visits with the resident. Advocates accompany residents around the PDC campus (both STA and GTA).

Volunteer Advocates provide weekly support to their assigned residents. Visits focus on how the individual resident's week has been and if there have been any issues of frustration. Some volunteers will role-play different scenarios to help the resident practice possible alternative solutions to situations of identified concerns. The volunteers identify staff or other resources that residents can contact to resolve issues or meet wishes. Volunteers assist with preparation for residents' Individual Program Planning (IPP) meetings, Meet & Greets, Transition Planning Meetings (TPM's), Transition Review Meetings (TRM's) and Special Meetings. They attend as many meetings as possible for their assigned clients but sometimes ask another volunteer, or the VAS Coordinator, to provide coverage if they have a conflicting schedule. Volunteers often address quality of life issues, such as: advocacy for appropriate placement, resolving conflicts with peers, ensuring that less capable residents are appropriately attired, and concerns with medication side effects, etc. All volunteers document notes regarding their advocacy assistance efforts.

Porterville has one Advocate (as well as the Coordinator) that continues to provide advocacy services after a VAS resident transitions to the community for one year at various intervals as required. Their visits include but are not limited to face to face visits at the following intervals: at the fifth day living at the home, the 30 day IPP meeting, the 60 day IPP meeting in some cases, the 90 day meeting, the six month meeting, and the one year IPP meeting with their consumer. The Advocate stays in contact with the resident or the facility staff by phone during the months when no meetings are held. These community meetings are usually held at the home or at the day services. Our Advocates complete documentation of their visits on several different forms developed for community follow up for all VAS residents.

The VAS project continues providing advocacy services after VAS resident transitions to the community for one year. The Advocate or Coordinator made 420 visits/contacts, or IPP review meetings with VAS residents living in the community. In addition, two VAS residents were transferred to Porterville due to medical needs from Sonoma, as a result of the evacuations. The Porterville VAS project provided advocacy for these VAS residents including attending Bio-Ethics meetings.

The volunteer advocates utilize individualized approaches to communicate with each of their clients depending on the current need of the resident. When working with

residents who are learning to be self-advocates, the volunteer uses more of a teaching model, encouraging the residents to speak up for themselves. When working with a resident who is unable to advocate for themselves or has not had success advocating for themselves, the volunteer makes requests through various team members and/or will follow up with the VAS Coordinator or CRA for assistance. Some examples include:

- A resident requested a Spanish-speaking advocate so that he could increase his language skills to better communicate with his family. He was provided with this service and is thrilled with the progress he is making.
- Two residents that are hearing impaired requested an advocate who would play games that utilize ASL to help them increase their vocabulary. The VASC and Advocate met with their Recreational Therapist (who is also hearing impaired) to gather suggestions and materials. Both residents continue to enjoy the games and have showed improvement in their ASL skills.
- A Volunteer Advocate had noticed one of their consumer's radio was not working. This was brought to the attention of unit staff. The resident's radio was fixed quickly and resident now listens to the radio daily, which decreased his behaviors.
- A Volunteer Advocate requested an IPP review as the consumer indicated that he was on too much medications. The team met and reduced the daily dosage per the consumer's request. He is more compliant with this and other medications being taken.
- A resident requested reading materials in regards to current events. This was elevated to the team and the Volunteer Advocate now discusses community current events during the visits.
- A resident was experiencing anxiety regarding his impending return to community living. The team reached out for an advocate. The volunteer advocate has been meeting with him regularly and providing him with information and insight on what is available to him in the community now. The resident is relieved to know that Advocacy services will continue once he is placed in the community.
- During a transition planning meeting, the potential provider indicated that the day program would be located approximately twenty-five minutes away from the home. The Volunteer Advocate addressed the concern of the resident regarding the length of travel as he has strong anxiety in moving vehicles. After a robust discussion, a day program was tailored around the resident's home to better suit him.

With the reduction in population in the GTA ,the facility has closed four residences: two SNF and two ICF this reporting period. Veteran staff continue to accept positions in the STA thus affecting consistency of services for the remaining consumers in the GTA. Advocates play a significant role is assisting their consumers during these transition periods.

The VAS project continues providing advocacy services after a VAS consumer transitions to the community for one year.

Description of barriers to increasing the number of volunteer advocates:

- In the Secured Treatment Area (STA) there are two programs (7 & 8). Each Program has multiple units at this time. To access these units, the volunteers must check out an alarm, have their photo identification and whistle on their person at all times prior to entering through a sally port. Then, they must either walk a long distance (sometimes in severe weather conditions) or wait for the tram.
- Residents have often been moved to other units and, sometimes, other programs with very little notice to the VASC.
- Often times staff in the (STA) do not understand the services that Advocates provide can and will be beneficial for forensic residents.
- Barriers to increasing the number of Volunteer Advocates include availability to reach out to the community and finding qualified, involved and available candidates. Porterville is in a rural area with many stigmatizations regarding the residents in the Secured Treatment Area.
- The volunteer advocate duties require that they have an extremely flexible schedule as they need to be available for scheduled and at times, unscheduled special meetings with the consumer.
- Potential advocates need to have a broad understanding of the range of needs of persons with developmental disabilities, knowledge of the Lanterman Act and what services are available to consumers within the State of California.
- Medical insurance and workers compensation coverage is not available for volunteer advocates.
- The processing of stipends may at times take longer time to process.

Sonoma

Volunteer advocates attended thirty-three IPP's or semi-annual IPP meetings. Advocates participated in fifty-three community transitional activities. These activities include: visits to community care facilities, day/work programs, meet and greets, Transition Planning Meetings, Special meetings and Transition Review Meetings. Sometimes advocates will accompany the VAS consumer on the day they transfer to the community.

Advocates attended three SDC unit transfer meetings. After the transfer, advocates will check on how the consumer is adjusting to the new unit.

The VAS project continues providing advocacy services after a VAS consumer transitions to the community for one year. The advocates or Coordinator made 136 IPP review meetings with VAS consumers living in the community.

Volunteer advocates consult and problem solve with social workers, regional center case managers, job coaches, teachers and unit staff. The advocates are involved in meetings that influence resident's day/work services and changes in health. Additionally, advocates attend meetings regarding care, treatment, palliative care or hospice needs. With numerous changes of level of care staff and supplemental staff in the consumer's life, advocates are a consistent person in the consumer's life. Often, Advocates provide information regarding consumers to unfamiliar team members.

Advocates provide support for consumers in exercising their rights and promoting dignity. They assist in problem solving with the consumer for increased independence. Advocates visit potential residential homes targeted for client. The advocates assist the ID team in making sure that consumer's needs will be met by the residential service provider. Examples include:

- At team meetings, advocates recommend the services needed for community placement for VAS consumers.
- The Coordinator or advocates had twenty-two meetings with regional center case managers to discuss community placement for consumers in the VAS project.
- When VAS consumers become anxious about moving into the community their advocates will discuss the move and try to reassure them.
- An advocate informed staff that a VAS consumer was soiled and needed assistance. The unit supervisor assured the advocate that staff will be reminded to check on the consumer more often. The advocate followed up on later visits.

- When GERs or general event reports (e.g., incident reports) are reported for VAS consumers advocates often will follow up to ensure plans of correction are followed.
- When learning that a VAS consumer was not attending his offsite day program, the advocate requested that the VAS consumer receive the needed assistance to attend the offsite.
- An advocate requested that a table by a VAS consumer's bed be moved so the consumer wouldn't hit their head on it. The table was moved.
- An advocate requested that a VAS consumer have assistance in going for walks at his offsite day program.
- An advocate and SDC social worker met with Nursing Facility Program Director requesting that a VAS consumer at a community hospital have familiar staff with them while at the hospital. The PD said that would not be possible due to staffing. The PD agreed to have staff check on the VAS consumer every shift.
- Advocate requested that familiar staff be assigned to a VAS consumer while at a community hospital because the consumer was not able to communicate his needs. The advocate was told that familiar staff was not needed for the consumer. The VAS Coordinator followed up.
- Advocate found a VAS consumer alone in a room at his offsite. The advocate informed the unit supervisor who said that a memo will be sent to teachers reminding them not to leave residents by themselves. VAS followed up with monitoring.
- Advocate requested a team meeting to discuss the health needs of a VAS consumer living in the community. Sonoma Regional Project did a health assessment for the consumer and changes were made to reduce the consumer's health risks.
- Advocate notified a unit supervisor that unit staff were unaware that a VAS consumer is able to feed themselves. The unit supervisor trained the staff on dining protocols for VAS consumer.
- A VAS consumer requested that he live in the same home with a peer. His advocate requested the regional center accommodate the VAS consumer's request. The regional center was not able to place the VAS consumer and his peer in the same home; but arranged for them to live nearby each other.

In October 2017, SDC residents were evacuated for two weeks due to the Northern California wildfires. For most of the two weeks the residents were at the Dixon fairgrounds. The Coordinator and advocates visited the VAS consumers at the evacuation sites numerous times to check on the welfare and to reassure them. One VAS consumer requires a special formula; and the advocate made sure that the formula provider knew where to send the formula. The Coordinator and advocate spoke with staff to see if VAS consumers had what they needed. The Coordinator spoke with SDC and DDS administrators regarding issues and concerns for SDC residents. These concerns included lack of showers (some SDC residents went without a shower for a week), residents being unable to get out of bed several days due lack of room and lack of equipment, also some residents were in wheelchairs for most of a day. This caused some residents to develop sores. Also, the Coordinator requested that community visits be made available. During the 2nd week of the evacuation there was an increase in community visits. During the evacuation, forty SDC residents were placed in the community, including six VAS consumers. The Coordinator or advocates attended the TRMs for VAS consumers. The Coordinator was in contact with the Sonoma Regional Project to keep informed of where VAS consumers were being moved. Two VAS consumers were transferred to Porterville due medical needs. The Porterville VAS project provided advocacy for these VAS consumers in addition to SDC follow up.

Of the six VAS consumers that were moved due to the evacuation; three were moved to temporary homes because their permanent homes were not ready to accept them. Because of these moves occurred sooner than planned; the residential provider staff did not have enough cross training. Two providers spoke with VAS advocates about the need for additional cross training from SDC staff. The Coordinator requested from SDC administrators and Sonoma Regional Project staff the need to provide more cross training for residential service provider staff. The advocates and the Coordinator were in constant contact with residential provider staff regarding these issues. SDC provided staff to conduct cross trainings in person or over the phone. Five VAS consumers that were placed during the evacuation are doing well and moved to their permanent homes. One VAS consumer that was placed passed away due to medical complications.

On October 22, 2017, SDC residents were moved back to SDC. Due to decreases in population because of community placement and smoke damage; there was a consolidation of residential units. Some of the VAS consumers were moved to units separate from their peers. The Coordinator and advocates requested that the VAS consumers move to units that would be more appropriate. SDC had these consumers moved.

When consumers are hospitalized; advocates visit them for emotional support and ensure their needs are met. In addition to IPP and semi-annual meetings, advocates

participate in special ID Team meetings concerning the consumer. For example, advocates or Coordinator attend meetings when there is a significant change in the consumer's health, a change in the individual's plan of care, or changes in an individual's behavioral plan. Advocates consult with the medical and direct care staff to ensure that all treatment options are considered. Advocates participate in ID Team discussions related to bioethical issues such as the decision to provide outside hospitalization for a consumer receiving end-of-life care.

Often advocates visit their consumers at the General Acute Care at SDC and community hospitals to make sure that they are comfortable and have a familiar person with them. Advocates and the Coordinator keep in contact regarding the health of VAS consumers.

- Advocate kept in contact with a UCSF doctor of a VAS consumer to keep informed of the VAS consumer's condition.
- Advocates participated in two special meetings regarding hospice care for VAS consumers.
- An advocate reminded a unit supervisor that a VAS consumer needs to have a leg boot on when resting in a chair. The unit supervisor assured the advocate that the staff will be reminded of this protocol. VAS monitored.
- Advocate requested that whenever a VAS consumer is outside that her head be covered to prevent sunburns and overheating.
- Often advocates will follow up on medical issues regarding VAS consumers.
- Due to a VAS consumer's health issues the advocate requested that a home visit prior to moving not be done. The team agreed with the advocate.
- During a VAS consumer's community review meeting the team discussed the VAS consumer's ongoing agitation. The advocate requested a physical assessment to see if the agitation was being caused by medical issues. The medical assessment showed the VAS consumer had an UTI which appeared to be the cause of the agitation.
- Advocate and SDC social worker visited a community to make sure the home will accommodate a VAS consumer's wheelchair. The provider staff assured the advocate and social worker that the VAS consumer will be able to access all of the home.

- A VAS consumer that moved to the community did not have a sidelyer to use at his home. The advocate spoke with SDC staff and was able to get a sidelyer to be donated to the VAS consumer.
- When reviewing VAS consumer's behaviors an advocate noticed an increase in the VAS consumer's agitation and GER reports. The advocate and Coordinator were concerned that the consumer's agitation might put consumer's community placement in jeopardy. The advocate requested the VAS consumer's medication be increased to the former levels. The team agreed and the medication change seemed to decrease the consumer's agitation.
- An advocate requested that a VAS consumer that was at the general acute unit be moved to the community when she became medically stable. This would prevent the VAS consumer from moving twice.
- An advocate requested that SDC staff provide more cross training for a VAS consumer's residential staff. The additional training was provided by SDC staff.
- At a 5 day review community review meeting the advocate assisted in showing residential staff how to assist a VAS consumer to feed himself independently. The advocate also showed the staff ways to communicate to the consumer using sign language and how to assist the consumer in walking around the house.
- Advocate called a VAS consumer living in the community so that the SDC staff could speak with the consumer. The consumer was happy to hear his former staff's voices.

Developmental Center	# of Residents Served by the Coordinator *	Average # of Contacts Per Month by the Coordinator with Each Resident Served	Average # of Individual Related Meetings Attended	# of Self-Advocacy Groups Facilitated by the Coordinators and Volunteers
Canyon Springs	10	8	8	4
Fairview	5	2	4	3
Porterville	5	2	6	3
Sonoma	1	1	1	2

* In some instances, a resident might be served by both the Coordinator and volunteer advocate, depending upon his or her needs.

ADVOCACY ASSISTANCE PROVIDED BY THE PROJECT COORDINATOR INCLUDING SELF-ADVOCACY GROUPS FACILITATED

Canyon Springs

The VAS Coordinator is based at Canyon Springs and works Monday through Friday and sometimes travels on Saturday or Sunday. Because the facility is so small, the Coordinator can have contact with clients on a daily basis. Clients are visited on campus and off campus work sites. The VAS Coordinator has assisted clients with obtaining information regarding dates for their court appearances and writing letters to their Regional Center Service Coordinators.

One on one advocacy has been provided to clients by the VAS Coordinator when Clients have requested a volunteer advocate, and there was not yet available. In addition, the VAS Coordinator is available during client mealtimes, breaks, in the exercise area and their work areas both on campus and off. This affords the opportunity to meet informally with clients and discuss personal advocacy, program goals, diet, exercise, the judicial process, human rights, client rights, work place issues and other concerns. Flyers and brochures, are posted throughout the facility and in the community with information on obtaining a volunteer advocate.

The VAS Coordinator meets frequently with volunteer advocates on a walk in basis or by appointment and telephone contact to provide support, mentoring and coaching to identify strategies for effective advocacy. The VAS Coordinator provides advocacy training quarterly for all advocates. Trainings include: Contact Log Information, Working with Social Workers at CS, Self-Advocacy and Transition into the Community. The VAS Coordinator consults with the assigned volunteers prior to client's meetings to assist with any concerns and attends meetings if needed.

The VAS Coordinator attends Human Rights Committee when the CRA is unavailable to attend. The Coordinator reviews changes/additions in medications and/or their treatment plans for clients and assists with making recommendations as requested by the client.

The VAS Coordinator distributes a monthly calendar of scheduled annual IPP meetings client's special meetings, video court meetings and monthly training calendars to all advocates.

The VAS Coordinator continues to participate in community based programs that assist with employment strategies and community resources for clients. In the last year, VAS Coordinator participated in:

Monthly meetings for Coachella Valley Annual Employment Expo Committee with Workforce Development and EDD Desert Communities Employer Advisory Board –

Co-Chair, Presentation to Businesses for Employment and Disability presented by SCDD regional office with Department of Rehabilitation participation
Riverside County Mental Health resource fair to recruit advocates and obtain resource material for clients, C.A.R.E Team meetings with County of Riverside, Office of Aging and other community based organizations to participate in preventing abuse with developmentally disabled and elderly citizens, and Emergency Training with State of CA Office of Emergency Training and SCDD regional office

The VAS Coordinator has visited ten clients that have transitioned into the community, and calls them weekly. VAS has one client scheduled to transition by the end of August 2018. Five clients are due to transition into the community by the end of the calendar year.

Fairview

- Acting VAS Coordinator requested and reviewed all annual IPP and any special meeting reports for all new consumers to Volunteer Advocacy Services program. An initial face-to-face meeting was completed to meet the consumer, and consult with staff, to better determine which advocate would be best to work with new VAS consumers.
- Acting VAS Coordinator requested and reviewed annual whole person assessments (WPA's) for all VAS consumers.
- The Acting VAS Coordinator sent Client Records a community resource list to have it included in the transition packet. This list was compiled by the VAS project. It was determined consumers and their families needed to have information about different community resources to help and facilitate successful transitions.
- When conducting a 90 day community follow up for one of the PDC consumers, the consumer reported to the Acting VAS Coordinator and the SCRP transition worker he had received a letter from SSI indicating he has an overpayment in the amount of over \$23,000. His regional center indicated they would follow up with SSI to determine what the issue(s) are. The Acting VAS Coordinator recently spoke with SCRP who indicated they have also notified Porterville Regional Project about this issue.
- Acting VAS Coordinator received notification that the SSI overpayment issue which had been identified in the first part of the fiscal year has been resolved. In addition to the issue being resolved, the consumer would be receiving SSI monies paid back to when the issue was first identified.

- Acting VAS Coordinator sent letters to all regional center liaisons with a list of their respective consumers who receive VAS services, reminding them of their responsibility to inform Advocacy Services of any incident reports once placed in the community.

Porterville

Advocacy assistance provided to residents by the Coordinator, during this reporting period, includes (but is not limited to) meeting attendance, consultations with the Executive Director, Clinical Directors, Program Directors, coverage for the Clients Rights Advocate, review of medications and attendance at HRC – Human Rights Committee and BMC – Behavior Management Committee, assignment of referrals, hiring and training of Volunteer Advocates, Self-Advocacy Training, preparation and processing of invoicing and reports.

Advocacy Coordinator participated in thirty Individual Program Plan meetings (IPP's), Transition Planning/Transition Review meetings, IPP review's, Emergent Risk Notification Evaluation meetings, Behavior Intervention Review Meetings. Additional examples of Advocacy Coordinator activities include:

- When conducting a 365 day face to face follow up, the advocate discussed concerns with staff regarding behaviors at his day program. While visiting the consumer there he was reluctant to pass by a particular peer. This was reviewed with the team members and the peer was moved to another area of the program site. Phone follow up 30 days later indicated no further issues noted with peer.
- Coordinator actively encourages consumer participation in all IPP meetings and specials.
- Coordinator is a member of the Human Rights Committee that meets once a month with PDC Quality Assurance as well as co-chairing the quarterly HRC meetings with the residents.
- Coordinator has provided direct consultation with Porterville Regional Project and various Regional Centers in regards to transition activities for the residents at PDC. As well as attendance at RRDP quarterly meetings.
- Coordinator attends/participates in monthly People First in both the GTA and STA as well as the Residents Rights Council in our Skilled Nursing Program.
- Coordinator made six presentations at PDC employee orientations. At the orientations there were a total of sixty-three employees. The presentations included discussions of client rights, the importance of IPPs, the denial of rights

process, descriptions of the VAS Project and CRA duties, and laws regarding people with developmental disabilities.

- Coordinator/Acting CRA made a rights presentation to forty-seven Foster Grandparents and Senior Companions.
- Coordinator participates in quarterly Foster Grandparents and Senior Companions Council meetings. The Coordinator will continue to be a Council member now that the program is under the purview of Central Valley Regional Center.
- Coordinator meets with administrative staff (Executive Director, Clinical Director) in a joint effort to increase, develop and promote opportunities for self-advocacy at PDC.
- Coordinator recruited one advocate. VAS is increasing self-advocacy training options.
- Coordinator provides training to the Volunteer Advocates on a monthly basis.
- Coordinator has been providing CRA services at PDC. Those activities include but are not limited to:
 - Weekly Behavioral Management Committee (reviewed 392 for Highly Restrictive Interventions)
 - Member of the Incident Action Team (In the meeting, CRA reviews facility IR/GER data and can investigate further if a rights issue is indicated).
 - Secure Treatment Area Information Committee
 - Weekly Human Rights Committee meetings
 - 9 Postural Restraint Review
 - 2 Regional Project Liaison meetings
 - 3 Town Hall meetings
 - Weekly Escort Review meetings
 - 3 Handcuff Briefing
 - Human Rights Committee
 - Approves and reviews denial of rights requests.
 - Provides rights and self-advocacy training to consumers and staff.
 - Talks and works with family members on rights issues.
 - Provides training to staff on how to effectively interact with consumers and to use positive reinforcement
 - Participates on committees to provide input into policies dealing with consumer's rights.
 - Reviews all proposed policy changes that involve clients' rights issues. Member of Policy Committee.

Sonoma

Coordinator participated in one-hundred-three Individual Program Plan meetings, transition planning/transition review meetings, as well as consultations with SDC staff, regional center case managers, Client's Rights Advocate, Regional Center Office of Clients Right Advocate and Sonoma Regional Project staff about specific issues for VAS clients. Coordinator attended seven meetings regarding health issues of VAS participants. Also, Coordinator attends meetings when a volunteer advocate can't attend.

Coordinator and SCDD North Bay Regional Office manager presented eight rights training sessions to SDC residents. The trainings included: information on voting, community living options, emergency preparedness, person centered planning, and personal rights. Due to the decrease of population in 2018, residential rights training was discontinued.

Coordinator made seven presentations at SDC employee orientations. At the orientations there were a total of thirty-six employees. The presentations included discussions of client rights, the importance of IPPs, the denial of rights process, descriptions of the VAS Project and CRA duties, and laws regarding people with developmental disabilities. Due to the October wildfires employee orientations were canceled until 2018. In August 2017, the Coordinator and CRA made a rights presentation to twenty-seven Foster Grandparents and Senior Companions. In March Coordinator, CRA and a SDC social worker gave a rights training for SDC unit staff. This training consisted of following an individual's behavior plan, SDC protocols, and resident's right of refusing medical treatment. Nineteen staff attended the training.

Coordinator is in contact with SDC staff when a VAS consumer has a change of service or requires hospitalization. Also Coordinator and advocates are contacted when there is a bioethical issues related to treatment or when there is a reportable incident involving a VAS consumer. Examples include:

- When attending IPP meetings the Coordinator consistently advocates for the consumer to participate in their meeting.
- Coordinator reviewed CDPH response to the Coordinator consumer complaint against UC Davis Medical Center on behalf of a VAS consumer.
- Coordinator informs advocates of incident reports, hospitalizations, and special meetings regarding their consumers.

- On a regular basis Coordinator and CRA meet with administrative staff (Executive Director, Clinical Director, and Sonoma Regional Project Director) in a joint effort to develop and promote opportunities for self-advocacy at SDC.
- Coordinator is a member of the Human Rights Committee that meets once a month.
- Coordinator meets with regional center case managers and representatives of the Sonoma Regional Project regarding community placement for the consumers in the VAS Project.
- Coordinator attends special meetings regarding service changes for VAS consumers.
- When covering for the CRA, Coordinator attends the Whole Person Review meetings, Policy Review Committee, and SDC Psychological/Sexual Committee meetings.
- Coordinator is a member of SDC Resident Transition Advisor Group. RTAG evaluates SDC transition planning process and makes recommendations to improve resident's transitions into the community. RTAG developed two documents on transition planning and an individualized orientation document for residential providers.
- When the coordinator learned of allegations of abuse and neglect on one of the SDC units; the coordinator followed up with Quality Assurance and the SDC Clinical Director to see if any VAS consumers were affected. Also Coordinator was told about SDC's plan of correction. The Coordinator notified advocates of the allegation and reminded the advocates of how to report abuse. The Coordinator participated in follow up meetings on the unit regarding the VAS consumers. In addition the Coordinator, along with CRA and SDC social worker made a presentation with the unit's staff on client's rights and mandated reporting policies.
- The Coordinator requested two regional centers place a VAS consumer and his friend in the same home in the community. The regional centers agreed and the friend of the VAS consumer will be living in the same home.
- A VAS consumer that recently moved was not receiving his SSDI benefits. The Coordinator spoke with SDC trust office to assist the residential provider in obtaining the consumer's benefits.

IMPACT OF CHANGES IN THE AMOUNT OF SERVICES PROVIDED THIS REPORTING PERIOD

Canyon Springs

The number of clients being served has increased due to increasing the number of new advocates.

There are more services provided to clients with the full –time VAS Coordinator on-site. The VAS Coordinator spends more time with each client getting to know their needs and requests and how better to match the client with a volunteer advocate.

The new VAS Coordinator meets with Program Director, Unit Supervisors and Executive Director to pass on information from the community that would benefit the clients. The VAS Coordinator is working with the SCDD Regional Office in San Bernardino and has scheduled monthly Self-Advocacy meetings on-site. The VAS Coordinator is working with the OCRA Clients Rights Advocate on-site with new Self-Advocacy Training and clients meetings.

Fairview

During the first reporting period of FY 2017-18, approximately the same number of meetings were attended by both the Acting VAS Coordinator and volunteer advocates due to the increase of VAS consumers in active transition to the community.

During the second half of FY 2017-18, there appears to be a slight increase in the number of meetings attended by both the Acting VAS Coordinator and volunteer advocates. Almost all of the consumers under the VAS program are in active transition. However many of the homes are still in the remodel phase. As a result, there have been more Transition Meeting updates in between the Transition Planning meeting and the Transition Review meetings.

Porterville

During the first reporting period of FY 2017-18, both Fairview and Canyon Springs were supporting the VAS program. No services to the residents were disrupted, however. In addition, the Program lost a very dedicated longtime Advocate, who passed away suddenly in August 2017. Existing Advocates absorbed the majority of her caseload.

During the second half of FY 2017-18, a VAS Coordinator was hired on 02/01/18 and quickly immersed herself in VAS activities. However, the Clients Rights Advocate

vacancy affected the duties of the VASC. Again, no services to the residents were disrupted.

Sonoma

In the last twelve months thirty-four VAS consumers from SDC moved into the community. Eleven VAS consumers from other DDS developmental centers or community facility that moved to Northern California continue to receive advocacy services from the VAS Project at SDC.

Due to upcoming closure, SCDD and Sonoma Developmental Center decided to cancel the annual Opportunity Fair.

IV. Service Outcomes

Canyon Springs

Volunteer advocates meet with their assigned clients on a weekly or bi-weekly basis to discuss the progress made in their individual program plans, work assignments and living arrangements. Often clients ask about their placement schedules.

Client shared with Volunteer that he was having problems getting ahold of his family. Volunteer assisted client with notifying social worker, who provided telephone numbers and addresses to client. Volunteers assisted clients in writing a letter to families.

Client shared with volunteer that he wanted to save money for transitioning into the community. Volunteer and client created a schedule to meet, devised a workable budget, and advocate encouraged him to save.

Client's shared with VAS Coordinator that they want more information about trust account activity. VAS Coordinator inquired with Staff and Trust Officer. VAS Coordinator provided them with information from Porterville Trust Office and contacts there. The clients at CS would benefit from interactive training on handling DDS based trust accounts.

Seven female clients asked VAS Coordinator to help with getting their hair cut out in the community. VAS Coordinator arranged for free haircuts and blow dry coupons at the local beauty school. Staff at CS arranged for the appointments and took clients to appointments. VAS Coordinator shares with Staff when the clients ask for appointments, after suggesting to client to ask Staff for an appointment during their weekly planning meetings on Sundays.

VAS Coordinator suggested to Unit Supervisor that clients like to create Goals/Vision Boards by cutting out magazines and gluing onto poster board. Staff arranged the activity and VAS Coordinator assisted and provided boxes of magazines.

Client in the community needed assistance with obtaining citizenship credentials. VAS Coordinator has hired a Volunteer to assist with language barriers and she has a contact at the Mexican Consulate. Client does not have SS card or CA ID and can't obtain work due to lack of credentials. Client is anxious and capable of working.

An advocate contacted the Unit Supervisor regarding a client's weight loss and mentioned his pants were falling off and that he might need a belt.

Advocates have contacted Unit Supervisor for assistance with meeting clients in the community for lunch outings. Several advocates have had a special lunch time with their client for their birthday or other occasion.

Advocates have assisted in IPP meeting when clients have not understood their goals or treatment plans and helped explain details at a later date. Advocates have assisted family members to understand details in the meeting when they were unable to attend.

VAS Coordinator implemented a program to train new advocates to contact the shift supervisor on the unit to assist with bringing the client into the great room for time with their advocate. This is usually implemented after working hours when there is more free time for the client to meet with his/her advocate. During working hours the advocates visit their clients at a designated break time. Breaks occur four times during the work day.

VAS Coordinator is working with Social Worker to implement additional CS training for newly hired volunteer advocates. VAS Coordinator encourages advocates to learn all they can about their clients from staff, case files, Social Worker observations, meetings and VAS Coordinator.

An advocate is working with staff to develop a community outing to the Rancho Mirage Library new observatory. His client expressed interest in learning more about planets.

Sunline bus sent a bus to the facility and twenty plus clients and four advocates rode the bus around the community. The Sunline bus company provided a facilitator to explain details about riding the bus for clients.

Ten advocates were recruited during this year. Two advocates are still in the hiring process and will be trained by end of August 2018. Five advocates have remained volunteers for over two years.

Fairview

- Completed and distributed monthly calendars of all IPP, special and/or transition meetings scheduled so Volunteer Advocates are able to attend.
- Monthly calendar of all FDC activities/special events were forwarded to Volunteer Advocates so they may encourage and assist VAS consumers in attending as many facility and community events as possible.
- Acting VAS Coordinator and Volunteer Advocates continued to attend all community meeting for VAS consumers who moved back to their home communities. VAS staff attended seventy-one various meetings in the community during this period.
- Acting VAS Coordinator continued to process monthly VAS invoices for the Fairview VAS volunteer advocates.
- Compile bi-monthly summary of services provided by Fairview VAS Program and submitted to manager of the CRA/VAS project.
- VAS project continued to provide support in all phases of transition activities for the twenty-four VAS consumers currently in some stage of transition from Fairview to various community settings.
- Acting VAS Coordinator continued to monitor consumers' Regional Center staffs' ability to participate in all of consumers meetings.
- Acting VAS Coordinator requested and reviewed of all Regional Center and day program's IPPs, reports and incident reports for VAS consumers who are now living in the community.
- Twenty-one Meet & Greet meetings held with VAS consumers
- Twenty-five Transition Planning Meetings (TPM) held with VAS consumers
- Fourteen Transition Review Meetings (TRM) held with VAS consumers
- Seventy-one face to face meetings were completed for VAS consumers living in the community. These visits include face to face visits at 5 days, 30 day, 60 and or 90 days, and one year time periods from leaving FDC.
- Continues to complete and distribute monthly calendars of all IPP, special and/or transition meetings scheduled so Volunteer Advocates can attend.

- Acting VAS Coordinator continues to process monthly VAS invoices for the Fairview VAS volunteer advocates.
- Acting VAS Coordinator continues compile bi-monthly summary of services provided by Fairview VAS Program and submits to manager of the CRA/VAS project.
- VAS project continues to provide support in all phases of transition activities for the twenty-three VAS consumers currently in some stage of transition from Fairview to various community settings.
- Acting VAS Coordinator continues to monitor consumers' Regional Center staffs' ability to participate in all of consumers meetings.
- Acting VAS Coordinator continues to request and review of all Regional Center and day program's IPPs, reports and incident reports for VAS consumers who are now living in the community. The VAS project continues to experience difficulty receiving incident reports from community providers and regional centers.
- All five FDC Volunteer Advocates continue to visit and telephone consumers in the community to assess and ensure all their needs are being met.

Porterville

Volunteer Advocates work specifically with residents on an individual basis (following Individual Program Plans (IPP's). They provide training, support and encouragement while focusing on self-advocacy goals. Many of our advocates have worked with their clients for many years and have made significant progress in the areas of communications (client to staff, client to client, etc.), issues concerning money handling and budgeting, work commitments, definition of goals, IPP attendance, behavioral issues, pre-placement transition and diet/health and exercise. Additional outcomes:

- Completed and distributed monthly calendars of all IPP, special and/or transition meetings scheduled so Volunteer Advocates are able to attend.
- Monthly calendar of all PDC activities/special events were forwarded to Volunteer Advocates so they may assist or encourage VAS consumers in attending as many facility and community events as possible.
- Coordinator continues to process monthly VAS invoices for the Porterville Volunteer Advocates.

- Compile bi-monthly summary of services provided by Porterville VAS Program and submitted to manager of the CRA/VAS project.
- VAS project continues to provide support in all phases of transition activities. As more and more residents are identified for community placement (least restrictive environment) all advocates have a resident or multiple residents that are increasingly apprehensive and anxious. The advocates are helping our residents by focusing on the positive aspects of these changes. Advocates are utilizing resources to acclimate the client to the new environment such as “Choices” materials as reinforcement.

Sonoma

- Coordinator and advocate requested that when an SDC NF (nursing facility) resident is a patient of a community hospital that SDC staff attend the resident to help support and communicate medical needs to hospital staff.
- Coordinator regularly meets with regional center case managers regarding specific needs for VAS consumers when move they transfer to the community.
- Advocates meet with potential community providers when those providers visit their clients or when the advocates tour the providers home. The advocates give information about their consumers to help the providers understand the consumers’ needs.
- Advocates and Coordinator assist with the comprehensive assessment for VAS consumers.
- Advocates report to the ID teams on how the consumers responded on their visits to community homes. This gives the ID teams additional information to assess if placements are appropriate.
- Coordinator encourages SDC to assist residents to appear at their commitment review hearings. Coordinator reports on residents’ court attendance to SDC human rights committee.
- An advocate assisted an SDC social worker in taking a VAS consumer on van rides in order to desensitize the consumer before community placement.
- Two VAS consumer were not attending day programs; the coordinator and SDC social worker requested that the regional center provide community integration activities for the VAS consumers. Also the regional center agreed to put in place

an in-home day program for the consumers. The VAS consumers are receiving community integration activities and in-home programming.

- The Coordinator and CRA met and informed the SDC Executive Director regarding possible right's violation of a VAS consumer. The Executive Director requested the unit supervisor file a GER.
- A VAS consumer living in the community wanted a lounge chair. The consumer's advocate found an unused lounge chair at SDC and the chair was given to the consumer.
- At a Transition Review Meeting the advocate; the advocate raised the concern that there wasn't a day program available to the VAS consumer when he moved. The advocate requested an activity and community integration plan. The residential provider provided a weekly schedule of activities.
- Coordinator requested the regional center provide day program services will be available when a VAS consumer moves into community. The regional center assured Coordinator that a day program will be available. Coordinator monitoring.
- Advocate requested that all scheduled cross trainings with the residential provider for a VAS consumer be completed before the VAS consumer moved into the community. The VAS consumer's team agreed.
- An advocate requested that a VAS consumer wear a cape instead of a blanket to cover herself in the community and day program. The residential provider purchased two capes for the consumer to use.
- When learning that a VAS consumer's team was reluctant to inform the VAS consumer of his friend's death; the Coordinator spoke to team members encouraging them to be honest and respectful of the VAS consumer's right to know what happened to his friend. The VAS consumer was informed of his friend's death and emotional supports were put in place.

V. Volunteers

Volunteer Advocates

Developmental Center	Males	Females	Persons with Disabilities	Relatives	Providers	Students	Professionals	Foster Grandparent Senior Companion	Other
<i>Canyon Springs</i>	4	11	3	0	0	1	2	0	8
<i>Fairview</i>	0	5	0	1	0	0	4	0	0
<i>Porterville</i>	4	5	0	0	0	0	4	0	5
<i>Sonoma</i>	1	5	0	1	0	0	0	0	5

* Relatives include anyone with a family member with disabilities; providers refers to anyone employed to provide services in the system; students are anyone enrolled in school; and professionals are those employed within the system.

VOLUNTEER RECRUITMENT ACTIVITIES/ BARRIERS TO INCREASING THE NUMBER OF VOLUNTEER ADVOCATES

Canyon Springs

Five volunteers were successfully recruited and trained. They were assigned clients and see them regularly. Presently, there are fifteen active volunteer advocates.

Volunteer recruitment consisted of the following: flyers posted at Canyon Springs and at local community centers, agencies, hospitals, libraries, medical clinics, professional organizations and colleges. Volunteer advocates have brought in leads for other potential volunteers and continue to inform the local community about opportunities. The VAS coordinator has met with individuals from other agencies, churches schools, libraries, professional organizations, and colleges to present the program mission and to build community relationships.

The Vas Coordinator continues to go in the community to explain the VAS project and answer questions. In addition, flyers are left at the public libraries, visitor centers and community centers in Cathedral City, La Quinta, Desert Hot Springs, Palm Desert, Palm Springs and in Indio.

The VAS Coordinator presented to the Psychology Club at California State University Palm Desert and College of the Desert. Informational materials were given to the department professor and distributed on campus. Three students have contacted VAS Coordinator for future advocacy positions. One has been recruited and in training.

The VAS Coordinator continues to be in contact with area colleges and schedule community presentations. Current volunteer advocates are recruited to assist with community outreach. This has been done in the past and has been, according to the volunteers, very rewarding.

Applications for volunteering have been abbreviated and are often sent to an interested applicant via email along with a letter explaining VAS in more detail. Once the application is received, VAS contacts the three references included on the application. If they are favorable recommendations, the VAS Coordinator contacts the applicant and has a face to face interview. Detailed questions are asked about their interests and experience. Information is given to the applicant about SCDD, DDS general information about clients at CS. VAS Coordinator then takes the applicant on the unit and introduces to some staff and clients. VAS Coordinator observes their reaction and debriefs after the walk-through. If there is a favorable reaction on each side, instructions and forms for fingerprinting and TB testing are given to the applicant to follow and complete.

Fairview

Currently there are five Volunteer Advocates participating in Fairview VAS Program. One advocate moved out of state, but a former advocate rejoined the program. There have not been any recruitment activities given the continued decreasing census and cases being closed after the 365th day.

Porterville

Acting VASC ceased service with three Volunteer Advocates during the first part of fiscal year 2017-18. In addition, one Volunteer Advocate passed away and one new Volunteer Advocate was hired. There are now five Volunteer Advocates participating in the Porterville VAS Program. The Volunteer Advocacy position has been posted at Central Valley Regional Center as well as ARC day program in Fresno. The Coordinator has met with Porterville Self Worth to promote Volunteer Advocate position as well as Porterville Chamber of Commerce.

Sonoma

Volunteers are recruited with referrals from previous and current volunteers. Coordinator is recruiting for community-based volunteer advocates through SCDD regional offices. The community-based advocate will provide advocacy services for VAS consumers that are placed from SDC in catchment areas outside the Sonoma region. Due to pending closure, on-site SDC volunteer advocate recruitment is no longer needed.

Volunteer Advocates Training

Developmental Center	# Training Sessions	# Volunteer Advocates Trained
<i>Canyon Springs</i>	18	15
<i>Fairview</i>	1	5
<i>Porterville</i>	6	5
<i>Sonoma</i>	2	6

SUMMARY OF TRAINING PROVIDED TO VOLUNTEERS PRIOR TO BEING ASSIGNED TO PROVIDE SERVICES

Canyon Springs

New volunteers received training in the following areas: The VAS program, SCDD, DDS, Regional Centers, Canyon Springs Administrative Policies, IPP, s rights, boundaries, mandated reporting, confidentiality, advocacy, PLUS PROGRAM (Canyon Springs positive behavior point system), the Lanterman Act, contraband, self-advocacy, judicial process, “My Own Choice” and Active Treatment Crisis Management (ATCM) and sensitivity training to better understand gender terminology. Volunteers are also provided with an orientation and complete tour of Canyon Springs and a VAS training manual.

A volunteer is matched with a client at Canyon Springs and an initial meeting is arranged and attended by the client, advocate and VAS Coordinator.

Fairview

One training was provided to VAS volunteer advocates during the first part of the fiscal year. The VAS project standardized its processes, including forms etc. across all the projects. This meeting was to review all new procedures and requirements. A discussion was held about the Community Options Fair and SCDD’s closure and community transition survey being implemented. Additionally, the Volunteer Advocates received GER training from FDC’s staff development.

During the second half of FY 2017-18, there were no training sessions. The Acting VAS Coordinator provided individual training in advocate specific areas as needed. Now that there has been a new VAS Coordinator hired, training sessions will commence.

Porterville

New advocates are provided training by staff and are given a copy of the Training Manual with project and PDC Policies & Procedures. (Existing advocates received updated material for their training manuals at monthly trainings) The following is a list of provided training:

- Review of the volunteer duty statement
- Confidentiality
- Client abuse and neglect
- Incident reporting of suspected abuse and neglect
- Keys, keycards, and personal alarms
- Property items allowed in Secure Treatment area
- Advocacy and client representation
- Advocacy and the IPP
- Boundary issues
- Clients' rights
- IPP meetings
- Interdisciplinary team
- Emergency procedures
- Documentation
- Grooming and Dress Code
- Personal Safety
- Advocacy Tools (Making Choices, All About Me, etc.)
- Transition Support

Sonoma

The training for new volunteers consists of an orientation to the Volunteer Advocacy project and an introduction to the developmental disabilities system of service. Topics include: advocacy, rights, the State Council on Developmental Disabilities activities, Regional Centers, the Lanterman Act, SDC policies regarding mandated reporting, the protocols to follow when taking clients off their residential unit. Advocates are reminded the importance of using the IPP for services and supports. Self-determination and empowerment are discussed in the training as well as People First and community advocacy organizations. New advocates are informed of and required to sign SCDD policies on confidentiality, the prohibition on advocates using their vehicles to transport clients as well as the prohibition on giving food or gifts to clients. Also advocates must have fingerprints on file with SDC and clear a background check. The new advocates are mentored by existing advocates.

Coordinator meets frequently with advocates on a 'walk-in' basis or by appointment to provide support and coaching to identify strategies for effective advocacy. The coordinator assists advocates as needed by joining them at ID team meetings or during community placement visits.

Training Provided to Advocates:

In August 2017, the Coordinator reviewed with the advocates SCDD new advocacy policies and advocate forms. In December 2017, Coordinator provided training on advocacy.

Volunteer Advocates Stipends

Developmental Center	Number of Volunteers Paid Stipends
<i>Canyon Springs</i>	13
<i>Fairview</i>	5
<i>Porterville</i>	5
<i>Sonoma</i>	6

BASIS FOR ESTABLISHING THE LEVEL OF STIPENDS

All volunteers statewide receive a flat rate amount of \$75.00 per individual per month. The volunteers dedicate three hours per month per individual served. The volunteer advocate visits or attends meetings on the individual's behalf at least twice per month per individual assigned. The VAS Coordinator may determine compensation for extended training and/or project meetings.

Volunteer advocates visit, attend all meetings, and keep in phone/email contact with individuals who transition to the community for one year after placement. Advocates attend the following meetings: five day, thirty day, ninety day, six month, and one year. During months with no set meeting, advocates visit and/or connect via telephone or email with the client or residential vendor staff.

THE RELATIONSHIP OF STIPENDS TO RECRUITMENT AND RETENTION OF VOLUNTEERS

Canyon Springs

Individuals recently recruited for the volunteer position at Canyon Springs have expressed that they are volunteering their time to give back to their community, to help persons residing at Canyon Springs Community Facility, for personal growth and because they believe it to be worthy of their time.

There appears to be a direct correlation between the amount of stipend offered and the amount of success achieved in recruitment and retention of volunteer advocates from local schools. Some students are interested in broadening their knowledge in Psychology and build their resume but the stipend is an attractive motivator.

An increase in the hourly training stipend to \$20.00 per hour and an increase to \$80.00 per client visit may be an option, now that minimum wage has been increased.

Fairview

Stipends are a motivator to maintain qualified persons to provide advocacy for Fairview VAS consumers both at FDC and in the community.

Porterville

The ability to provide a stipend has a direct relationship on recruitment and retention of the volunteer advocates. Many advocates do not reside in Porterville and travel several miles to provide advocacy services. If the stipend reimbursement were no longer provided, it would negatively influence the amount and quality of services to residents at PDC.

Sonoma

The stipend is very important in the recruitment and retention of advocates. With the increase in transitional activities the volunteer advocates are participating in more transitional meetings and five face to face meetings after VAS consumers move into the community. Many of the potential advocates that are referred to the coordinator are retired, interested in meaningful volunteer work, and also in need of supplementing their income. It would be difficult to recruit and retain volunteer advocates without a stipend.

VI. Barriers, Observations and Recommendations

Canyon Springs

- Some clients at Canyon Springs are involved in off-site work projects meaning clients are not available for advocate visits during their work hours.
- Some interested volunteers are inexperienced and intimidated once they have training from Canyon Springs.
- Some volunteer advocates have comprehension concerning adults with developmental disabilities and services available to them.
- Volunteer advocates complete training and then their life situations change preventing their continued commitment, i.e, moving or illness
- Flexible schedules-volunteers have to be available for scheduled and some unscheduled meetings.
- Reimbursement- volunteers are paid by stipends which usually takes 30-45 days before receiving payment.
- Not all volunteer advocates are interested in travelling in the community once the client has achieved placement.
- Clients request another advocate once new advocates are hired. They see advocates that come regularly for another client and they want that advocate.
- Volunteer training and orientation is a lengthy process. Although the VAS Coordinator can train anytime, mandatory facility training occurs twice a month. Most volunteers want to begin volunteering immediately but they have to wait to complete the training at CS.
- Volunteers must have an extremely flexible schedule in order to attend consumer meetings including special meetings which are scheduled, and volunteers are given short notice to attend. Volunteers are asked to give a six-month commitment and many of the volunteers have outside jobs/careers that prevent them a flexible schedule. Most advocates have been able to complete their six-month commitment.

Observations:

- Sometimes clients are out of the facility working on the truck in the community. Advocates are told by staff that the client is at work but sometimes the client is not at work. Advocates have to wait until staff confirm where the client is located.

Communication:

Volunteer advocates have shared that they have had difficulties arranging visits with the clients at Canyon Springs. Several phone calls have had to be made in order to schedule a visit with clients at Canyon Springs. Volunteer Coordinator has met with Canyon Springs' administration and alternative telephone numbers have been

provided to them. These numbers include those of the Office of Protective Service (OPS) and the administrator on duty (AOD).

A list of clients with their matched advocates is provided to Executive Director by the VAS Coordinator. The VAS Coordinator provides a walk through of the facility with potential and recently hired volunteer advocates and introduces them to the Executive Director and all staff available. OPS meets each volunteer advocate when issuing a facility badge.

There is frequent hiring of staff at CS. VAS Coordinator asked OPS if they could provide a picture collage of volunteer advocates to distribute to new staff. When presented to OPS it was suggested that VAS just take a picture with her camera. VAS will continue to pursue this option with the new ED. At the same time, pictures of clients could be updated too and a new collage of their pictures could be distributed.

Fairview

- Some current VAS advocates are not able to travel outside of Orange County for follow-up of VAS consumers moving into other counties. Therefore, the Acting VAS Coordinator has been attending the meetings for the VAS consumers no longer residing in Orange County where the advocate will not be following them. Additionally, the VAS office may not be notified of scheduled quarterly meetings in the community as cases are often transferred to the Regional Center facility liaison who may be unaware of involvement of VAS program for those consumers. Some of the quarterly meetings do not correspond with the project's required timeframes. The required face to face meetings may be on different days of the scheduled quarterly meetings. All VAS advocates continue to be encouraged to accompany the South Coast Regional Project staff during all follow-up meetings for VAS consumers. The newly hired VAS Coordinator will remain in contact with Regional Center DC liaisons and the new Regional Center workers assigned to each VAS consumer. If quarterly meetings are different than the required face to face meetings, advocates have been requested to contact SCRP transition workers to request participating in the quarterly meetings via teleconference.
- Despite sending out letters to the regional centers and providing SCRP with a current VAS caseload list, we are not being notified of Special Incident Reports on a regular basis. We may hear of incidents in passing but there continues to be a lack of notification of meaningful, important incidents involving VAS clients in the community. The Acting VAS Coordinator continues to have conversations with regional center liaisons and SCRP transition workers to remind them of the need for Advocacy Services being notified of special incidents.

Porterville

- Some current VAS advocates are not able to travel to visit residents in the community. Porterville has one advocate who sees residents who have transitioned. However, he cannot see those residents who have been placed outside of a 100-mile radius. Therefore, the VAS Coordinator attends the meetings/contacts for the VAS residents outside of that radius.
- Despite sending out letters to the Regional Center's we are not being notified of Special Incident Reports on a regular basis. While attending a required meeting or during the phone contacts, the Volunteer Advocate is told of the special incident. VAS Coordinator continues to have conversations with regional center liaisons and Porterville Regional Project to remind them of the need for Advocacy Services being provided with SIRs.
- Despite multiple requests for notification of any meetings for consumers residing in the community there continues to be a lack of communication of meeting scheduling.
- Coordinator will remain in contact with Regional Center DC liaisons and Regional Center caseworkers assigned to each VAS consumer.
- Coordinator will continue to coordinate with Porterville Regional Project to be kept abreast of all meetings and transition activities.
- Coordinator reviews VAS events on the Facility Calendar monthly so that Advocates are aware of the events and can plan accordingly with their residents. VASC continues to have advocates remind residents and staff the day of the event, to ensure access and participation in the Self Advocacy Trainings and and/or other events planned.

Sonoma

Communication: Coordinator advocates for better communication between SDC staff and advocates regarding changes in medical, medication, procedures, and general health condition. Coordinator assures that the DC Social Workers and advocates have current contact information.

Staff shortages continue to affect the quality of services for VAS consumers. Staff newly appointed to a unit are unaware of specific client needs and preferences. Staff shortages have increased the closure of day/work programs.

Often day program services are not available for VAS consumers when they are placed in the community. In some cases months pass before VAS consumers receive day program services. The residential service providers' staff provide activities and community integration activities for VAS consumers waiting for day programs to begin. These services provide less than optimal socialization and community access activities.

VAS ROSTER

STATE DEVELOPMENTAL CENTER VOLUNTEER ADVOCACY SERVICE COORDINATORS

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